## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
WOMEN SPEAK OUT PAC						
	C C00530766					
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report file						
Full Name of Payee	Date of Public Distribution/Dissemination					
Facebook, Inc.	M M / D D / Y Y Y					
Mailing Address 1 Hacker Way	10 30 2018 Amount					
City State Zip Code	2541.67					
Menlo Park CA 94025	Transaction ID : SE.10168  Date of Disbursement or Obligation					
Purpose of Expenditure Digital ads  Category/ Type 004	10 30 / Y Y Y Y Y					
Name of Federal Candidate Support Office	ce Sought: House District:					
MORRISEY, PATRICK MR, , ,	President Senate State: WV					
Calendar Year-To-Date Per Election for Office Sought  Disk 2018	oursement For: Primary Seneral  Other (specify)					
Full Name of Payee Facebook, Inc.	Date of Public Distribution/Dissemination					
Mailing Address	10 30 2018					
Mailing Address 1 Hacker Way	Amount					
City State Zip Code	2541.67					
Menlo Park CA 94025	Transaction ID : SE.10171 Date of Disbursement or Obligation					
Purpose of Expenditure Digital ads  Category/ Type  004	10 30 / 2018					
Name of Federal Candidate Support Office	ce Sought: House District:					
MANCHIN III, JOE, , ,	President Senate State: WV					
Calendar Year-To-Date Per Election for Office Sought  Dist 201	oursement For: Primary General  8 Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	5092.24					
(a) SOBTOTAL OF REINIZED Macpendoni Experialidaes	5083.34					
(b) SUBTOTAL of Unitemized Independent Expenditures	11717					
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
24.0	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Signature						

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	NOENT EXICID	TIONES		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			С	C00530766
Check if 24-hour report 48-hour re	port New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee FP1 Strategies, LLC			M = M	ic Distribution/Dissemination
Mailing Address 1826 Jefferson PL, NW			Amount	30 2018
City	State	Zin Codo		4000.00
Washington	DC	Zip Code 20036		4000.00  ID: SE.10181 ursement or Obligation
Purpose of Expenditure Digital ads		Category/ Type 004	10	30 2018
Name of Federal Candidate		<b>X</b> Support	Office Sought:	House District:
MORRISEY, PATRICK MR, , ,		Oppose		Senate State: WV
Calendar Year-To-Date Per Election for Office Sought	,	16000.34	Disbursement For: 2018 Other (sp	Primary <b>✗</b> General pecify) ▶
Full Name of Payee FP1 Strategies, LLC			Date of Publ	ic Distribution/Dissemination
Mailing Address 1826 Jefferson PL, NW			10 Amount	30 2018
City Washington	State DC	Zip Code 20036	Transaction I	4000.00  D: SE.10183 ursement or Obligation
Purpose of Expenditure Digital ads		Category/ Type 004	10	/ 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
MANCHIN III, JOE, , ,		<b>x</b> Oppose	President	Senate State: WV
Calendar Year-To-Date Per Election for Office Sought		20000.34	Disbursement For: 2018 Other (s	Primary <b>X</b> General pecify) ▶
(a) SUBTOTAL of Itemized Independent Ex	penditures		·	8000.00
(b) SUBTOTAL of Unitemized Independent	Expenditures		. •	
				7
(c) TOTAL Independent Expenditures			<b>&gt;</b>	7
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Buchanan, Emily, , , Signature	[Electron	ically Filed] Date	10 / 31	2018

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
WOMEN SPEAK OUT PAC	C C00530766					
Check if 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee LCX.com, LLC	Date of Public Distribution/Dissemination					
ECX.com, EEC	10 30 Y Y Y Y Y Y					
Mailing Address 2173 Salk Avenue	Amount					
Suite 250	Amount					
City State Zip Code	3000.00					
Carlsbad CA 92008	Transaction ID : SE.10173  Date of Disbursement or Obligation					
Purpose of Expenditure Digital ads  Category/ Type 004	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate Support Office	e Sought: House District:					
MORRISEY, PATRICK MR, , ,	President Senate State: WV					
Calendar Year-To-Date Per Election for Office Sought  Disb 2018	oursement For: Primary					
Full Name of Payee	Date of Public Distribution/Dissemination					
LCX.com, LLC	M = M / D = D / Y = Y = Y					
Mailing Address 2173 Salk Avenue	10 30 2018					
Suite 250	Amount					
City State Zip Code	3000.00					
Carlsbad CA 92008	Transaction ID : SE.10175					
Purpose of Expenditure  Category/ O04	Date of Disbursement or Obligation					
Digital ads Ode Type 004	10 30 2018					
Name of Federal Candidate Support Office	ce Sought: House District:					
MANCHIN III, JOE, , ,	President Senate State: WV					
Odiolidai lodi lo Dato	oursement For: Primary X General					
Per Election for Office Sought 11083.34 201	8					
(a) SUBTOTAL of Itemized Independent Expenditures	6000.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Buchanan, Emily, , ,  [Electronically Filed] Date	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Oignatule						

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

	ule E)	LAFLINDI	TOTILS			PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME C	OF COMMITTEE (In Full)				FEC ID	
	MEN SPEAK OUT PAC					ENTIFICATION NUMBER ▼ C00530766
Check if	24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M /	D   D / Y   Y   Y   Y
	Name of Payee			Da	te of Public	Distribution/Dissemination
	edia Bridge				10	30 / Y Y Y Y Y Y
Iviali	ing Address 11300 Astarita Ave			Am	ount	
City		State	Zip Code			458.50
	tlow	VA	22534			D: SE.10177 rsement or Obligation
	pose of Expenditure ital ads		Category/ Type 004		10	30 / 2018
Nam	ne of Federal Candidate		<b>x</b> Support	Office Sou	ıght:	House District:
МО	RRISEY, PATRICK MR, , ,		Oppose	Pres	sident	Senate State: WV
	Calendar Year-To-Date Per Election for Office Sought	, , ,	11541.84	Disbursen 2018	nent For: Other (sp	Primary <b>X</b> General ecify) ▶
	Name of Payee			Da	te of Public	Distribution/Dissemination
	edia Bridge				10 /	30 / 2018
Mail	ling Address 11300 Astarita Ave			An	nount	
City		State	Zip Code			458.50
	rtlow	VA	22534			rsement or Obligation
	pose of Expenditure gital Ads		Category/ Type 004		10	30 / 2018
Nan	ne of Federal Candidate		Support	Office So	ught:	House District:
MA	NCHIN III, JOE, , ,		X Oppose	Pre	sident	Senate State: WV
	Calendar Year-To-Date Per Election for Office Sought	, , ,	12000.34	Disbursen 2018	nent For: Other (sp	Primary <b>X</b> General ecify) ▶
(a) S	SUBTOTAL of Itemized Independent Expenditures					047.00
(a) 3	OBTOTAL OF Remized independent Expenditures	······		. •		917.00
(b) S	SUBTOTAL of Unitemized Independent Expenditu	res		·· •		
(c) T	OTAL Independent Expenditures			•		20000.34
with,	r penalty of perjury I certify that the independer or at the request or suggestion of, any candidate committee) any political party committee or its a	e or authorized				
Si	Buchanan, Emily, , ,	[Electron	ically Filed] Date	10	/ 31	2018